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FAX TO: Patent Office, Office of Initial Patent Examination
FACSIMILE NO: 703-872-9306
SUBJECT: CHANGE OF CORRESPONDENCE ADDRESS
OUR REFERENCE: PLEASE SEE ATTACHED TRANSMITTALS FOR CORRESPONDING SERIAL NOS.
FROM: Wendy Saxby for Dale C. Barr
DATE: October 4, 2004

MESSAGE: Please see the attached. Thank you!

Serial No.: 10-720,614/BING-1-1032
Serial No.: 10/324,769/BOEI-1-1112
Serial No.: 10/426,400/BOEI-1-1164
Serial No.: 10/652,538/BOEI-1-1166
Serial No.: 10/286,097/BOEI-1-1087
Serial No.: 10/653,014/BOEI-1-1194
Serial No.: 10/402,508/BOEI-1-1153
Serial No.: 10/404,471/BOEI-1-1154
Serial No.: 10/427,687/BOEI-1-1155
Serial No.: 10/438,137/BOEI-1-1174
Serial No.: 10/653,010/BOEI-1-1175
Serial No.: 10/611,397/BOEI-1-1176
Serial No.: 10/606,067/BOEI-1-1184
Serial No.: 10/611,702/BOEI-1-1182
Serial No.: 10/611,703/BOEI-1-1181
Serial No.: 10/611,757/BOEI-1-1180
Serial No.: 10/721,212/BOEI-1-1179
Serial No.: 10/611,216/BOEI-1-1177

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This facsimile is [37] pages in length, including the cover sheet.
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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/611,757
	Filing Date	June 30, 2003
	First Named Inventor	Turner, Robert W.
	Art Unit	2877
	Examiner Name	Not Assigned Yet
	Attorney Docket Number	BOEI-1-1180
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Black Lowe & Graham, PLLC		
Signature	<i>Dale C. Barr</i>		
Printed name	Dale C. Barr		
Date	Oct. 4, 2004	Reg. No.	40,498

CERTIFICATE OF TRANSMISSION/MAILING		
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Typed or printed name	Wendy Saxby	Date 10/4/04

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CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. BOX 1460 Alexandria, VA 22313-1460	Application Number	10/611,757
	Filing Date	30-Jun-2003
	First Named Inventor	Turner, Robert W.
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	BOEI-1-1180

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☐ Assignee of record of the entire interest.
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☒ Attorney or Agent of record.
☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration number _____

Typed or Printed Name	Dale C. Barr Reg. No. 40,498
Signature	Dale C. Barr
Date	April 21, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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